



SunSmart Survey for skin cancer prevention in outdoor workers

You are invited to take part in this survey for outdoor workers.

The purpose of the survey is to find out about how you are protected from ultraviolet (UV) rays when working outdoors.

Participation in this survey is voluntary and all responses are anonymous.

The survey will take 5-6 minutes to complete.

You will be asked a number of questions on your exposure to ultraviolet (UV) rays in your work, sun protection measures, sunburn, and awareness of the risks from the sun.

Your anonymous feedback will be used to help us to get a better understanding of the sun behaviours and skin cancer prevention in outdoor workers.

I have read the information provided relating to this study. I have had enough time to consider the information. I understand that my participation is voluntary and that I am free to withdraw at any time.

Do you wish to proceed?

Yes

No



Skin Cancer Prevention Survey

1. Gender

- Male
- Female
- Prefer not to say

2. Age

- Less than 18
- 18-24
- 25-34
- 35-44
- 45-54
- 55-64
- 65-74
- 75+

3. What type of outdoor work do you do? (this is workplace specific please categorise your employees depending on the nature of their work, e.g farming, construction, gardening, transport, postal service etc.)

4. What is your natural (non-sun exposed) skin colour?

Pale white skin

White skin

Light brown skin

Moderate brown skin

Dark brown skin

Dark brown to black skin

| Score | Description | Female | Male |
|-----------------|--|--------|------|
| 0-6 | Pale white skin | | |
| Type I | Extremely sensitive skin, always burns, never tans <i>Example: red hair with freckles</i> | | |
| 7-13 | White skin | | |
| Type II | Very sensitive skin, burns easily, tans minimally <i>Example: fair skinned, fair haired Caucasians, northern Asians</i> | | |
| 14-20 | Light brown skin | | |
| Type III | Sensitive skin, sometimes burns, slowly tans to light brown <i>Example: darker Caucasians, some Asians</i> | | |
| 21-27 | Moderate brown skin | | |
| Type IV | Mildly sensitive, burns minimally, always tans to moderate brown <i>Example: Mediterranean and Middle Eastern Caucasians, southern Asians</i> | | |
| 28-34 | Dark brown skin | | |
| Type V | Resistant skin, rarely burns, tans well <i>Example: some Hispanics, some Africans</i> | | |
| 35+ | Deeply pigmented dark brown to black skin | | |
| Type VI | Very resistant skin, never burns, deeply pigmented <i>Example: darker Africans, Indigenous Australians</i> | | |

* The information published here is not intended to take the place of medical advice. Please seek advice from a qualified health care professional.



5. What happens to your skin when you go out in the sun without sun protection?

- Always burns, never tan
- Burns easily, tans minimally
- Sometimes burn, slowly tans to light brown
- Burns minimally, always tans to moderate brown
- Rarely burns, tans well
- Never burns, tans very easily

UV Exposure

6. When do you mainly work outdoors?

- Early morning (before 11am) and/or late afternoon/evening (after 3pm)
- Mid-day (11am-3pm)
- All day

7. When working outdoors, are you exposed to the sun for:

- Less than one hour
- Between 1-3 hours per day
- Greater than 3 hours per day



8. Is it possible for you to limit the amount of time you spend working in the sun during mid-day hours (11am-3pm)?

Yes
No
Sometimes

9. Do you do a lot of outdoor work between April and September?

Yes
No

10. Is shade provided when you are working?

Shade is provided (canopy, umbrella, tent, vehicle)
Some shade (natural shade from trees or shade from the side of buildings)
No shade

11. Is shade provided when you are taking a break?

Shade is provided (canopy, umbrella, tent, vehicle)
Some shade (natural shade from trees or shade from the side of buildings)
No shade

12. Do you work around reflective surfaces?

No
Yes: concrete, white paint
Yes: asphalt, grass/parklands



13. How much time do you spend in vehicles?

- Less than 1 hour
- Between 1-3 hours
- Greater than 3 hours per day

14. Is there window tinting in the vehicles you drive?

(Laminated windscreens have UV protection of 50+, while plain window glass in car side windows is usually about UV protection 12, unless clear or tinted film is applied).

- Yes
- No

Sun Protection

15. Which, if any, of the following methods of sun protection do you use while you are at work (provided by yourself or the employer)? (tick all that apply)

| | Provided by Yourself | Provided by your Employer |
|--|--------------------------|---------------------------|
| Long sleeves | <input type="checkbox"/> | <input type="checkbox"/> |
| Long leg cover | <input type="checkbox"/> | <input type="checkbox"/> |
| Wide-brimmed hat | <input type="checkbox"/> | <input type="checkbox"/> |
| UV protection Sunglasses or safety glasses | <input type="checkbox"/> | <input type="checkbox"/> |
| Use sunscreen | <input type="checkbox"/> | <input type="checkbox"/> |
| Other (please specify) | <input type="checkbox"/> | <input type="checkbox"/> |
| <hr/> | | |
| No protective measures taken | <input type="checkbox"/> | <input type="checkbox"/> |



IF WEARS SUNSCREEN ASK NEXT QUESTION (if using survey monkey)

16. Which sunscreen Sun Protection Factor (SPF)¹ do you use most often?

- SPF less than 15
- SPF 15-30
- SPF 31-50
- 50+
- Unsure

ASK ALL (if using survey monkey)

17. How do you decide when to take sun protection measures?

(tick all that apply)

- | | |
|--|--|
| Summer months <input type="checkbox"/> | Wind conditions <input type="checkbox"/> |
| Temperature <input type="checkbox"/> | Humidity <input type="checkbox"/> |
| Cloud cover <input type="checkbox"/> | Wear sunscreen all year <input type="checkbox"/> |
| UV index <input type="checkbox"/> | |
| Other (please specify) | |
-

18. Have you heard of the UV index?

- Yes
- No
- Don't know

¹ SPF or Sun Protection Factor is a measure of how well a sunscreen will protect skin from UVB rays



If YES (if using survey monkey)

19. Where do you access/look up the UV index

| | | | |
|------------------------|--------------------------|----------------|--------------------------|
| I don't look it up | <input type="checkbox"/> | Newspaper | <input type="checkbox"/> |
| Radio | <input type="checkbox"/> | Television | <input type="checkbox"/> |
| Met Éireann | <input type="checkbox"/> | Smartphone App | <input type="checkbox"/> |
| Online | <input type="checkbox"/> | | |
| Other (please specify) | <hr/> | | |

Sunburn

20. How many times have you experienced sunburn? (red skin for hours after being in the sun)

| | Never | 1-2 times | 3-4 times | 5+ times |
|-----------|--------------------------|--------------------------|--------------------------|--------------------------|
| Last year | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Lifetime | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

21. Have you experienced sunburn while working outdoors?

| | Never | 1-2 times | 3-4 times | 5+ times |
|-----------|--------------------------|--------------------------|--------------------------|--------------------------|
| Last year | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Lifetime | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |



If YES ASK NEXT 2 QUESTIONS (if using survey monkey)

22. Where on your body have you experienced sunburn most often?

(tick all that apply)

| | | | | | |
|---------|--------------------------|---------------|--------------------------|-------|--------------------------|
| Face | <input type="checkbox"/> | Neck | <input type="checkbox"/> | Ears | <input type="checkbox"/> |
| Nose | <input type="checkbox"/> | Shoulders | <input type="checkbox"/> | Hands | <input type="checkbox"/> |
| Head | <input type="checkbox"/> | Arms | <input type="checkbox"/> | Feet | <input type="checkbox"/> |
| Chest | <input type="checkbox"/> | Legs | <input type="checkbox"/> | Back | <input type="checkbox"/> |
| Stomach | <input type="checkbox"/> | Back of knees | <input type="checkbox"/> | | |

23. Where on your body have you experienced the worst sunburn?

(tick all that apply)

| | | | | | |
|---------|--------------------------|---------------|--------------------------|-------|--------------------------|
| Face | <input type="checkbox"/> | Neck | <input type="checkbox"/> | Ears | <input type="checkbox"/> |
| Nose | <input type="checkbox"/> | Shoulders | <input type="checkbox"/> | Hands | <input type="checkbox"/> |
| Head | <input type="checkbox"/> | Arms | <input type="checkbox"/> | Feet | <input type="checkbox"/> |
| Chest | <input type="checkbox"/> | Legs | <input type="checkbox"/> | Back | <input type="checkbox"/> |
| Stomach | <input type="checkbox"/> | Back of knees | <input type="checkbox"/> | | |

Risk awareness

24. Select any potential dangers of UV rays? (tick all that apply)

| | | | |
|----------------------|--------------------------|-----------------------|--------------------------|
| Eye damage | <input type="checkbox"/> | Dehydration | <input type="checkbox"/> |
| Skin cancer | <input type="checkbox"/> | Other cancers/growths | <input type="checkbox"/> |
| Skin soreness/Pain | <input type="checkbox"/> | Bad for you (general) | <input type="checkbox"/> |
| Rash/skin irritation | <input type="checkbox"/> | Don't know | <input type="checkbox"/> |
| Skin ageing | <input type="checkbox"/> | Skin damage | <input type="checkbox"/> |

Other (please specify)



25. Select the most common ways you have heard or read information about skin cancer prevention? (tick up to three)

| | | | |
|------------------------|--------------------------|-------------------------------------|--------------------------|
| Television | <input type="checkbox"/> | Magazines | <input type="checkbox"/> |
| Newspaper | <input type="checkbox"/> | Health professionals (GP/nurse etc) | <input type="checkbox"/> |
| Pharmacy | <input type="checkbox"/> | Posters/leaflets in public places | <input type="checkbox"/> |
| Workplace | <input type="checkbox"/> | School | <input type="checkbox"/> |
| Online | <input type="checkbox"/> | Family/friends | <input type="checkbox"/> |
| Social media | <input type="checkbox"/> | Radio | <input type="checkbox"/> |
| Other (please specify) | | | |

Any other comments:

Thank you for your time in completing this survey

Remember to protect your skin and eyes

Protect your skin



Know the UV index: When the UV index is 3 or above you need to protect your skin. In Ireland, the UV index is usually 3 or above from April to September, even when it is cloudy. Stay safe by limiting time in the sun when UV is strongest, typically between the hours of 11:00am-3:00pm



Slip on clothing: Cover skin as much as possible, wear long sleeves, collared t-shirts, clothes made from close-woven material that does not allow sunlight through.



Slop on broad-spectrum (UVA/UVB) sunscreen. Apply sunscreen with a sun protection factor (SPF) of at least 30+ for adults and 50+ for children, with high UVA protection, and water resistant. Reapply regularly. No sunscreen can provide 100% protection, it should be used alongside other protective measures such as clothing and shade.



Slap on a wide brimmed hat: Protect your face, ears and neck.



Seek shade: Sit in cover of trees to avoid direct sunlight. Use a sunshade on your buggy or pram. **Keep babies and children out of direct sunlight.**



Slide on sunglasses: Guard your eyes from harm by wearing sunglasses with UV protection.



Do not deliberately try to get a suntan. Avoid getting a sunburn. Never use a sunbed.